



2000

Massachusetts  
Department of  
RevenueForm 63 FI  
Financial Institution Excise Return

For calendar year 2000 or taxable period beginning		2000 and ending	
Name of corporation ▶		Federal business code ▶	Federal identification number (FID) ▶
Principal business address City/Town State Zip		State or country of incorporation	
Principal business address in Massachusetts City/Town State Zip		Date business began in Massachusetts ▶	
<b>1.</b> ▶ Corporation is participating in the filing of U.S. consolidated return? <input type="checkbox"/> Yes (Enter name and FID of common parent corporation below.) <input type="checkbox"/> No ▶		<b>2.</b> ▶ Last year audited by IRS: _____ Adjustments reported to Mass.? <input type="checkbox"/> Yes <input type="checkbox"/> No (attach explanation)	
<b>3.</b> IRS forms filed: ▶ <input type="checkbox"/> 1120 <input type="checkbox"/> 1120-A <input type="checkbox"/> 1120S		<b>4.</b> ▶ If requesting alternative apportionment, check here <input type="checkbox"/> and attach Form AA-1.	
<b>5.</b> ▶ Check appropriate box: (a) <input type="checkbox"/> new business (b) <input type="checkbox"/> business terminated (c) <input type="checkbox"/> business has predecessor (d) <input type="checkbox"/> business has successor. If (c) or (d) is checked, enter name, address, state of incorporation and FID of such other business organization: _____		<b>6.</b> Check here if return filed by FDIC ▶ <input type="checkbox"/>	
<b>7.</b> Date of charter of organization ▶		<b>8.</b> Name of treasurer	
<b>9.</b> ▶ Check type of financial institution: 0132 <input type="checkbox"/> Other Financial Institutions 0133 <input type="checkbox"/> Domestic Bank 0134 <input type="checkbox"/> Foreign Bank			

		Use whole dollar method
<b>Excise Tax</b>	<b>1.</b> Income taxable in Massachusetts (Schedule A, line 13) ▶ <b>1</b>	\$
	<b>2.</b> Excise due before credits, multiply line 1 by 10.5% ▶ <b>2</b>	
	<b>3.</b> Economic Opportunity Area Credit (Schedule EOA, line 9) ▶ <b>3</b>	\$
	<b>4.</b> Full Employment Credit (Schedule FEC, line 22) ▶ <b>4</b>	
	<b>5.</b> Excise after credits. Subtract the total of line 3 and line 4 from line 2. ▶ <b>5</b>	
	<b>6.</b> Minimum excise (cannot be prorated) ▶ <b>6</b>	456
	<b>7.</b> Excise due before voluntary contribution (line 5 or line 6, whichever is greater) ▶ <b>7</b>	
	<b>8.</b> Voluntary contribution for endangered wildlife conservation ▶ <b>8</b>	
	<b>9.</b> Economic Opportunity Area Credit Recapture (attach Schedule H-2) ▶ <b>9</b>	
	<b>10.</b> Excise due plus voluntary contribution and EOA credit recapture. Add lines 7, 8 and 9. ▶ <b>10</b>	

<b>Refund/Tax Due</b>	<b>11.</b> 1999 overpayment applied to your 2000 estimated tax ▶ <b>11</b>	
	<b>12.</b> 2000 estimated tax payments (do not include amount in line 11) ▶ <b>12</b>	
	<b>13.</b> Payments made with extension ▶ <b>13</b>	
	<b>14.</b> Total tax payments. Add lines 11, 12 and 13 ▶ <b>14</b>	
	<b>15.</b> Amount overpaid. If line 10 is smaller than line 14, subtract line 10 from line 14 ▶ <b>15</b>	
	<b>16.</b> Amount overpaid to be credited to 2001 estimated tax ▶ <b>16</b>	
	<b>17.</b> Amount overpaid to be refunded. Subtract line 16 from line 15 ▶ <b>17</b>	
	<b>18.</b> Balance Due. If line 14 is smaller than line 10, subtract line 14 from line 10 ▶ <b>18</b>	Balance due
	<b>19.</b> M-2220 penalty ▶ \$ _____; Late file/pay penalties ▶ \$ _____ Total penalty ▶ <b>19</b>	
	<b>20.</b> Interest on unpaid balance ▶ <b>20</b>	
	<b>21.</b> Total payment due at time of filing. Make remittance payable to: Commonwealth of Massachusetts ▶ <b>21</b>	Total due

Bank Disclosure Schedule. Massachusetts requires all financial institutions to complete the following items.	
<b>A.</b> Enter the amount claimed as a deduction for contributions to bad debt reserve from the corporation's federal return for the taxable year. ▶ <b>A</b>	
<b>B.</b> Enter the amount of bad debts that actually went bad during the taxable year ▶ <b>B</b>	
<b>C.</b> Enter the amount of capital loss claimed federally that was treated as an ordinary loss, per IRC sec. 582(c). ▶ <b>C</b>	
<b>D.</b> Enter the total amount of capital gains claimed on U.S. Form 1120 or 1120S. ▶ <b>D</b>	
<b>E.</b> Enter the amount of total income as reported on U.S. Form 1120 or 1120-A, line 11 or 1120S, line 6 ▶ <b>E</b>	

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which he/she has knowledge.			
Signature of appropriate officer	Date	Social Security number	Title
Individual or firm signature of preparer	Date	Employer ID number	Address

If you are signing as an authorized delegate of the appropriate officer, check here ☐ and attach Massachusetts Form M-2848, Power of Attorney.

Mail to: Massachusetts Department of Revenue, PO Box 7052, Boston, MA 02204.

Form Code 375

An exact copy of all pages of U.S. Form 1120, 1120-A or 1120S as filed must be attached to this return with applicable schedules and forms required to substantiate the Massachusetts excise. If filing U.S. Form 1120S, complete and attach a pro forma U.S. Form 1120. Any changes or amendments to any U.S. amount must be explained in detail. Any return filed without the copy of such U.S. information attached is an incomplete return and is subject to assessment penalties.

<b>1.</b> Gross receipts or sales (from U.S. Form 1120 or 1120-A, line 1c) . . . . .	<b>▶ 1</b>	\$
<b>2.</b> Net income (from U.S. Form 1120, line 28 or U.S. Form 1120-A, line 24) . . . . .	<b>▶ 2</b>	
<b>3.</b> State and municipal bond interest not included in federal net income (total from Schedule B, column D) . . . . .	<b>▶ 3</b>	
<b>4.</b> Foreign, state or local income, franchise, excise or capital stock taxes deducted from federal net income . . . . .	<b>▶ 4</b>	
<b>5.</b> Portion of net capital loss carryover used to reduce capital gain on U.S. Schedule D. . . . .	<b>▶ 5</b>	
<b>6.</b> Other income not included in line 2, above . . . . .	<b>▶ 6</b>	
<b>7.</b> Adjusted income. <i>Add lines 2 through 6.</i> If loss, enter "0" . . . . .	<b>7</b>	
<b>8.</b> Abandoned Building Renovation deduction. Total cost \$ _____ x .10 = . . . . .	<b>▶ 8</b>	
<b>9.</b> Dividends deduction (from Schedule D, line 5) . . . . .	<b>▶ 9</b>	
<b>10.</b> Total deduction. <i>Add lines 8 and 9.</i> . . . . .	<b>10</b>	
<b>11.</b> Income subject to apportionment. <i>Subtract line 10 from line 7.</i> If loss, enter "0" . . . . .	<b>▶ 11</b>	
<b>12.</b> Income apportionment percentage (Schedule E, line 5 or 100%, whichever applies) . . . . .	<b>▶ 12</b>	%
<b>13.</b> Income taxable in Massachusetts. <i>Multiply line 11 by line 12.</i> Enter here and on line 1 of return. If loss, enter "0" here and on line 1 of return . . . . .	<b>▶ 13</b>	

## Schedule B. Wholly Tax-Exempt Interest

a. Security	b. Rate	c. Maturity	d. Interest received	e. Amortization	f. Net interest
			\$	\$	\$
Enter column D total on Schedule A, line 3					

## Schedule C. Business Locations Outside Massachusetts

Complete this schedule only if the corporation has income from business activities which is taxable both in Massachusetts and in any other states.

Location (city and state)	Business activity conducted at location	Number of locations	Answer Yes or No	
			Registered to do business in state	Files returns in state

## Schedule D. Dividends Deduction

Beginning January 1, 1999, 95% of dividends received from or on account of the ownership of any class of stock, if the financial institution owns 15% or more of the voting stock of the institution paying the dividend, will be allowed as a deduction to net income. Attach schedule showing payers, amounts and percent of voting stock owned by class of stock.

<b>1.</b> Total dividends (U.S. Form 1120, Schedule C, line 19) . . . . .	<b>1</b>	
<b>2.</b> Dividends, if less than 15% of voting stock owned		
<b>a.</b> On common stock . . . . .	<b>2a</b>	
<b>b.</b> On preferred stock . . . . .	<b>2b</b>	
<b>3.</b> Total taxable dividends. <i>Add lines 2a and 2b.</i> . . . . .	<b>3</b>	
<b>4.</b> Dividends eligible for the deduction. <i>Subtract line 3 from line 1.</i> . . . . .	<b>4</b>	
<b>5.</b> Dividends deduction. <i>Multiply line 4 by .95. Enter here and in Schedule A, line 9.</i> . . . . .	<b>5</b>	

## Apportionment Factors

a. Receipts from lease, sublease or rental of real property	1a
b. i. Receipts from lease, sublease or rental of tangible property (other than transportation property)	1bi
ii. Receipts from lease, sublease or rental of transportation property	1bii
c. Interest (including fees and penalties) received on loans secured by real property	1c
d. Interest (including fees and penalties) received on loans not secured by real property	1d
e. i. Net gain on sale of loans secured by real property	1ei
ii. Net gain on sale of loans not secured by real property	1eii
f. Interest (including fees & penalties) on credit card receivables	1f
g. Net gains on sales of credit card receivables (but not less than zero)	1g
h. Credit card issuer's reimbursement fees	1h
i. Receipts from merchant discount	1i
j. i. Loan servicing fees from loans secured by real property	1ji
ii. Loan servicing fees from loans not secured by real property	1jii
k. Receipts from performance of other services	1k
l. Interest, dividends and net gains (but not less than zero) from investment and/or trading assets and activities	1l

[illegible]

**a.** Average value of real or tangible property rented from another (capitalized at eight times gross rents during taxable year)

**i.** Real property ..... **2ai**

**ii.** Tangible property (other than transportation property) ..... **2aii**

**iii.** Transportation property ..... **2aiii**

▶	
▶	
▶	

► iv. Alternative method used? Yes ☐ No ☐

i. Real property .....	<b>2bi</b>
ii. Tangible property (other than transportation property) .....	<b>2bii</b>
iii. Transportation property .....	<b>2biii</b>

▶	
▶	
▶	
▶	
▶	▶

► Enter number of times per year:

	▶
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g. Property apportionment percentage: Divide column A total by column B total. 2g ▶ %

a. Total ..... **3a**

b. Payroll apportionment percentage. Divide column A total by column B total .....

▶	▶
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3b  %

.....4	▶	%
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re and in Schedule A, line 12 ..... **5** ▶ %